



RFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of:

INVENTORS: ChiFai Yip

SERIAL NO.: 10/698,132

ART UNIT: 2681

FILED: 10/31/2003

EXAMINER: Unknown

TITLE: Directional Coupler For Use In VCO Unequal Power Splitting

ATTORNEY DOCKET NO.: 871.0114.U1(US)

Commissioner For Trademarks

P.O. Box 1450

Alexandria, VA 22313-1450


INFORMATION DISCLOSURE STATEMENT

Dear Sir:

Pursuant to Sections 609 and 707.05(b) of the MPEP and 37 CFR 1.97-1.99, the attached form PTO-1449 lists a U.S. Patent, which may be pertinent to the invention as claimed in the above-identified application.

The citation of this U.S. Patent should not be construed as a representation that a thorough search has been made, or that other, more pertinent material is not available.

Respectfully submitted,



Harry F. Smith  
Reg. No. 32,493

HARRINGTON & SMITH, LLP

4 Research Drive

Shelton, CT 06484-6212

Telephone: (203)925-9400

Facsimile: (203)944-0245

email: hsmith@HSPatent.com

Customer No.: 29683

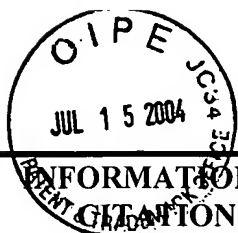


CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail on the date shown below in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

7/13/04  
Date

Clarence F. Meier  
Name of Person Making Deposit



<b>INFORMATION DISCLOSURE CITATION FORM FOR PATENT APPLICATION (FORM PTO-1449) (Substitute)</b>	Docket No.: 871.0114.U1(US)	Serial No.: 10/698,132
	Applicant(s): ChiFai Yip	
	Filing Date: 10/31/03	Group: 2681

**U.S. PATENT DOCUMENTS**

Examiner Initials	Document Number (Number-Kind Code)	Publication Date (MM-DD-YYYY)	Name of Patentee or Applicant	Class	Sub-class
	US-6,215,988 B1 US- US- US- US- US- US- US- US- US- US- US- US- US-	04-10-2001	Matero	455	188.1

**FOREIGN PATENT DOCUMENTS**

Examiner Initials	Document Number (Country Code-Number-Kind Code)	Publication Date (MM-DD-YYYY)	Name Of Patentee of Applicant	Translation? Yes/No/n/a
	- - - - - - - - - - - - - -			

**OTHER DOCUMENTS (Author (Capitalize), Title, Date, Pages, Etc., if known)**


Examiner's Signature:

Date Considered:

Initial if reference was considered, whether or not citation is in conformance with MPEP. Mark through citation if not considered.  
Include a copy of this citation form with your next correspondence to the Applicant(s).